



**SUPPORTIVE AND/OR HOUSING SERVICES MASTER AGREEMENT**

**WORK ORDER SOLICITATION SHSMA-WOS\_IHS-003**

**FOR**

**INTERIM HOUSING SERVICES-ENHANCED EMERGENCY SHELTER PROGRAM**

**LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH**

**August 2019**

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## **EXHIBITS**

- 1 STATEMENT OF WORK
- 2 FEE SCHEDULE
- 3 ADDITIONAL REQUIREMENTS

## **WORK ORDER SOLICITATION INTERIM HOUSING SERVICES- ENHANCED EMERGENCY SHELTER PROGRAM**

### **1.0 INTRODUCTION**

The Enhanced Emergency Shelter Program (EESP) for Transition Age Youth (TAY) is intended to provide shelter, food, clothing, hygiene products, supports (transportation, linkage to mental health, substance abuse, vocational, educational, counseling, benefits establishment, and more permanent housing options), and other identified necessities to Seriously Emotionally Disturbed (SED) and Severe and Persistently Mentally Ill (SPMI) TAY, 18 to 25 years of age, who are homeless, or at immediate risk of becoming homeless. These TAY generally have no other available funding source to pay for housing.

### **2.0 SCOPE OF SERVICES**

EESP services and supports shall be provided and be open to TAY on a 24-hour basis in Respondent's facility(ies) (e.g. shelter, board and care, transitional housing, sober living homes) for a maximum of 60 consecutive nights per episode. In no event shall EESP services and supports provided pursuant to this Contract be furnished for more than 60 continuous nights per client, per episode. Subsequent extensions may be made upon review of the particular client's housing plan and implementation progress and written approval from DMH.

The Respondent shall satisfactorily perform all services set forth in the Statement of Work (SOW), Exhibit 1, and be paid at the rates in the Fee Schedule, Exhibit 2 of this Work Order Solicitation (WOS). It is anticipated that the term of the Work Order shall be effective from the date of execution through June 30, 2022, with a five (5) year option period through June 30, 2027, provided the Master Agreement is extended for that period. The option period shall be exercised at the Health Agency Director's discretion.

### **3.0 MINIMUM REQUIREMENTS**

- 3.1** Respondent shall have a current status of good standing as a Supportive and/or Housing Services Master Agreement (SHSMA) Contractor. Respondents that are not current SHSMA contractors may respond to this WOS if they submit a Statement of Qualifications (SOQ) to DHS' Request for Statement of Qualifications (RFSQ) for Supportive and/or Housing Services and are issued a Master Agreement. Responses to this WOS will be accepted on continuous basis throughout the Master Agreement Term.
- 3.2** Respondent shall have three (3) years' experience, within the last five (5) years (as of the date of SOQ submission) providing equivalent or similar services stated in Exhibit 1, SOW to the population in Exhibit 1, SOW.

- 3.3** Respondent's proposed EESP site shall currently, and for the past three (3) years', be operating as a shelter site and shall meet all zoning codes as one of the following: 1.) a temporary emergency shelter OR 2.) A transitional living facility OR 3.) A sober living facility OR 4.) A board and care OR 5.) A substance abuse treatment facility OR 6.) A supportive housing, OR 7.) A temporary shelter.

#### **4.0 WORK ORDER SOLICITATION TIMETABLE**

- Work Order Solicitation Release: .....08/28/19
- Initial Written Questions Due Date/Time: .....09/3/19, 3:00 p.m.
- Initial Response Due Date/Time: .....09/18/19, 11:00 a.m.\*

\*This WOS shall remain open until County's needs are met. Responses that are submitted after Initial Response Due Date/Time indicated above will be considered for review at the convenience of the County.

#### **5.0 RESPONDENT QUESTIONS**

Questions **must be submitted by e-mail** to the contact person identified below and must be received no later than September 4, 2019 at 3:00 p.m. PST. All questions, without identifying the submitting Agency, will be compiled and, along with the appropriate answers, will be made available via e-mail to all the current SHSMA Contractors.

When submitting questions, be as specific as possible, indicating the area of the WOS that prompted the question. The County reserves the right to group similar questions when providing answers.

Questions should be emailed to the individual identified below:

ATTN: Cathy Castellon  
County of L.A. – Department of Health Services  
Contracts and Grants Division  
E-mail: [MCastellon2@dhs.lacounty.gov](mailto:MCastellon2@dhs.lacounty.gov)

#### **6.0 RESPONSE INSTRUCTIONS**

The Response to this WOS shall include each of the following in the prescribed format and order:

##### **6.1 Cover Memo**

Identify the WOS by title and number; firm name and address; and the name, telephone number, and e-mail address of the person authorized to make representations for the Respondent during negotiations.

## **6.2 Minimum Requirements**

- 6.2.1 Respondent shall submit contact information (name, address, e-mail address and phone number) of contractors your agency has provided EESP including documentation to substantiate years of experience.
- 6.2.2 Respondent shall provide 1.) zoning map for the proposed EESP site including all available zoning information (regulations, ordinances, codes, planning, etc.); and 2.) Copy of the Certificate of Occupancy, as indicated in Section 3.3.

## **6.3 Experience, Approach and Methodology**

- 6.3.1 Provide a detailed description of your agency's experience as specified in Section 3.0. Minimum Requirements. Include your agency's experience providing services.
- 6.3.2 Provide an implementation plan describing how your agency will commence and implement services as described in Exhibit 1, SOW, for clients.

## **6.4 Required Forms**

- 6.4.1 The Respondent shall complete and submit Exhibit 3 – Additional Requirements. Respondent shall complete, sign form, and attached all the supporting documentation.

## **7.0 RESPONSE SUBMISSION REQUIREMENTS**

The Respondent shall **email** one (1) Response by the Response Due Date and Time to the individual identified below:

ATTN: Cathy Castellon  
County of L.A. – Department of Health Services  
Contracts and Grants Division  
E-mail: [MCastellon2@dhs.lacounty.gov](mailto:MCastellon2@dhs.lacounty.gov)

All Respondents shall provide the name of their Agency and the title and number of the WOS on the subject line.

## **8.0 REVIEW AND SELECTION PROCESS**

The County reserves the sole right to exercise its judgment concerning the selection and review of the contents of the Responses submitted pursuant to this

WOS and to determine which Respondent best serves the interests of the County.

As a result of this WOS, the County may:

- 1) Request further information, documents, presentations, and/or conference call or in-person interviews substantiating Respondents' qualifications, experience, and readiness to provide the services described in the WOS;
- 2) Enter into contract negotiations based on Respondent's submission; and/or
- 3) Take no further action at this time on this matter.

## **8.1 Response Selection Process**

The selection process will begin with receipt of the Response. All responses will be reviewed based on the criteria listed below.

### **8.1.1 Respondent's Experience, Approach and Methodology**

- The Respondent meets the minimum requirements as set forth in Section 3.0, Minimum Qualifications.
- The Respondent's narrative responses to Section 6.2 – Experience, Approach and Methodology.

### **8.1.2 Required Forms**

- Exhibit 3 – Additional Requirements

## **9.0 WORK ORDER**

A Work Order will be executed with the selected Respondent as authorized under delegated authority by the County's Board of Supervisors. The Statement of Work to the Work Order, shall be agreed upon by the selected Respondent and the County, based on the Respondent's response.

## **10.0 TRUTH AND ACCURACY OF REPRESENTATIONS**

False, misleading, incomplete, or deceptively unresponsive statements in connection with a Response shall be sufficient cause for rejection of the Response. The review and determination in this area shall be at the DHS Director of Contracts and Grant's sole judgment and his judgment shall be final.

## **11.0 NOTICE TO RESPONDENTS REGARDING THE PUBLIC RECORDS ACT**

- 11.1 Responses to this solicitation shall become the exclusive property of the County.
- 11.2 Exceptions to disclosure are those parts or portions of all Vendors that are justifiably defined as business or trade secrets, and plainly marked by the Vendor as "Trade Secret", "Confidential", or "Proprietary".
- 11.3 The County shall not, in any way, be liable or responsible for the disclosure of any such record or any parts thereof, if disclosure is required or permitted under the California Public Records Act or otherwise by law. **A blanket statement of confidentiality or the marking of each page of the Response as confidential shall not be deemed sufficient notice of exception. The Vendors must specifically label only those provisions of their respective Response which are "Trade Secrets", "Confidential", or "Proprietary" in nature.**
- 11.4 In the event the County is required to defend an action on a Public Records Act request for any of the aforementioned documents, information, books, records, and/or contents of a Response marked "confidential," "trade secrets," or "proprietary," Vendor agrees to defend and indemnify County from all costs and expenses, including reasonable attorneys' fees, incurred in connection with any action, proceedings, or liability arising in connection with the Public Records Act request.

## **12.0 COUNTY RIGHTS AND RESPONSIBILITIES**

The County has the right to amend, re-issue, or cancel this WOS by written addendum. The County is responsible only for that, which is expressly stated in this solicitation document and any authorized written addenda thereto. Should such addendum require additional information not previously requested, failure to address the requirements of such addendum may result in the Response not being considered, as determined in the sole discretion of the County. The County is not responsible for and shall not be bound by any representations otherwise made by any individual acting or purporting to act on its behalf.